Eill	in this informa	tion to identify your ca	350.			
	tor 1					
Den	itor i	Amelia Rose Temp	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
		ruptcy Court for the:	EASTERN DISTRICT C			
Orm	eu States Darik	rupicy Court for the.	LASTERN DISTRICT C	N WICH HOAN		
Cas (if kn		-49229-mar			_	t if this is an ded filing
Su	mmary of			nd Certain Statistical Information		12/15
infor	mation. Fill ou	t all of your schedules	first; then complete th	he information on this form. If you are filing amen the box at the top of this page.		
Part	1: Summar	ize Your Assets				
					Your as	ssets of what you own
1.		B: Property (Official For 55, Total real estate, fro			\$	0.00
	1b. Copy line	62, Total personal prope	erty, from Schedule A/B		\$	6,460.50
	1c. Copy line	63, Total of all property	on Schedule A/B		\$	6,460.50
Part	2: Summar	ize Your Liabilities				
						abilities t you owe
2.			ims Secured by Property n A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	5,106.00
3.			nsecured Claims (Officia (priority unsecured claim	l Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	677.00
	3b. Copy the	total claims from Part 2	(nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	59,702.00
				Your total liabilitie	s \$	65,485.00
Part	3: Summar	ize Your Income and E	xpenses			
4.		our Income (Official Formation of the comments		1	\$	1,808.00
5.		our Expenses (Official F			\$	1,805.00
Part	4: Answer	These Questions for A	dministrative and Stat	istical Records		
6.		• •	Chapters 7, 11, or 13? n this part of the form. C	heck this box and submit this form to the court with y	our other sch	nedules.
7.	YesWhat kind of	debt do you have?				

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum page 1 of 2 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,533.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	677.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	17,619.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	18,296.00

Debtor 1				
Debtor 1	mation to identify your c	-		
	Amelia Rose Temp	Dieton Middle Name Last Name		
Debtor 2				
(Spouse, if filing)	First Name	Middle Name Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN		
Case number	17-49229-mar			☐ Check if this is an
				amended filing
Official Fo	rm 106A/B			
_		artv		40/45
	e A/B: Prope	ILY items. List an asset only once. If an asset fits in more than or		12/15
hink it fits best. B nformation. If mor Answer every ques	le as complete and accurate re space is needed, attach a stion.	e as possible. If two married people are filing together, both ar separate sheet to this form. On the top of any additional page	re equally responsible for su	pplying correct
Part 1: Describe	Each Residence, Building,	Land, or Other Real Estate You Own or Have an Interest In		
. Do you own or I	have any legal or equitable	interest in any residence, building, land, or similar property?		
■ No. Go to Par	rt 2			
Yes. Where i	·			
	s the property:			
Part 2: Describe	Your Vehicles			
□ No ■ Yes			Do not deduct occured a	nime or exemptions. Dut
	Chevrolet	Who has an interest in the property? Check one		ed claims on Schedule D:
	HHR 2010	☐ Debtor 1 only	Creditors Who Have Cla	
Approximat		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other inforr	mation:	At least one of the debtors and another	,	
		Check if this is community property (see instructions)	\$3,000.00	\$1,500.00

□ No

Schedule A/B: Property Official Form 106A/B

page 1

Del	otor 1	Amelia Rose	e Templeton	Case number (if known)	17-49229-mar
ı	Yes.	Describe			
			Household Goods & Furnishings		\$1,500.00
[□ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; compu phones, cameras, media players, games	uters, printers, scanners; music c	ollections; electronic devices
			Printer		\$50.00
	Example ■ No		figurines; paintings, prints, or other artwork; books, pictures, ons, memorabilia, collectibles	or other art objects; stamp, coin,	or baseball card collections;
9. E	quipme	ent for sports a	graphic, exercise, and other hobby equipment; bicycles, poo	I tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
		Describe			
ı	No .		s, shotguns, ammunition, and related equipment		
11. [Clothes Examp ☐ No	s	othes, furs, leather coats, designer wear, shoes, accessories		
			Clothing		\$1,000.00
[□No	•	welry, costume jewelry, engagement rings, wedding rings, he	eirloom jewelry, watches, gems, g	old, silver
			Jewelry		\$300.00
[<i>Examp</i> ⊐ No	rm animals oles: Dogs, cats, Describe	birds, horses		
			1-Dog		\$50.00
_	Any otl ■ No	her personal an	d household items you did not already list, including any	r health aids you did not list	
[☐ Yes.	Give specific inf	ormation		
15.		the dollar value	of all of your entries from Part 3, including any entries fo	r pages you have attached	\$2,900.00

Schedule A/B: Property

Official Form 106A/B

De	ebtor 1	Amelia	Rose Templ	eton	Case number (if known)	17-49229-mar
Pa	rt 4: De	escribe Your	r Financial Asset	ts		
Do	you o	wn or have	e any legal or e	equitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			our wallet, in your home, i	n a safe deposit box, and on hand when you file your petition	non
					Cash	\$300.00
	Exam		king, savings, o		certificates of deposit; shares in credit unions, brokerage hthe same institution, list each.	nouses, and other similar
	□ No■ Yes.				Institution name:	
				Checking	Citizens Bank, Joint with Mother	\$0.50
			17.2.	Checking	CFCU	\$1.00
			17.3.	Checking & savings accounts	Huntington Bank	\$25.00
			17.4.	Checking	Capital One Bank	\$1.00
			17.5.	Checking, Savings	Comerica Bank, Joint with grandmother	\$300.00
	Exam ■ No	s, mutual fu	unds, or public funds, investme	cly traded stocks ent accounts with brokera	ge firms, money market accounts	
	joint v	ublicly trac	ded stock and	interests in incorporate	d and unincorporated businesses, including an interes	t in an LLC, partnership, and
	■ No □ Yes.	. Give spec		about them me of entity:	% of ownership:	
	Nego	tiable instru	<i>ment</i> s include p	personal checks, cashiers	e and non-negotiable instruments ' checks, promissory notes, and money orders. to someone by signing or delivering them.	
	☐ Yes.	. Give speci	ific information a	about them uer name:		
			ension account sts in IRA, ERIS		, thrift savings accounts, or other pension or profit-sharing	plans
	_	. List each a	account separat Type	tely. of account:	Institution name:	
			401(i		Great West Trust Co.	\$883.00

Official Form 106A/B Schedule A/B: Property page 3

D	eptor 1	Amelia Ros	e i empleton			ase number (if known)	17-49229-mar
22.	Your sh Examp	les: Agreements	ed deposits you ha	ve made so that you may conti epaid rent, public utilities (elect			es, or others
	⊔ Yes			institution na	ime or individual.		
23.	Annuiti	es (A contract for	or a periodic paym	ent of money to you, either for	ife or for a number of y	rears)	
	☐ Yes	ls	ssuer name and de	escription.			
24.			on IRA, in an acc 529A(b), and 529	ount in a qualified ABLE prog b)(1).	gram, or under a quali	ified state tuition pro	gram.
	☐ Yes	lr	nstitution name and	d description. Separately file the	e records of any interes	sts.11 U.S.C. § 521(c):	
25.	Trusts,	equitable or fu	iture interests in	property (other than anything	listed in line 1), and	rights or powers exe	cisable for your benefit
	☐ Yes.	Give specific in	formation about th	em			
26	Examp. ■ No	les: Internet dor		secrets, and other intellectual ites, proceeds from royalties ar em		s	
27.	Examp. ■ No	les: Building pe	and other generarmits, exclusive lic	enses, cooperative association	holdings, liquor license	es, professional license	s
М	onev or r	property owed	to vou?				Current value of the
IVI	oney or p	oroperty oweu	to you :				portion you own? Do not deduct secured claims or exemptions.
28.	_	unds owed to y	/ou				
	☐ No ■ Yes. (Give specific inf	ormation about the	em, including whether you alrea	dy filed the returns and	I the tax years	
				2017 Anticipated Tax Ref	unds (est)	Federal and Stat	se \$550.00
29	■ No			,, spousal support, child suppo	rt, maintenance, divorce	e settlement, property	settlement
30.	Examp		ges, disability insul npaid loans you ma	ance payments, disability bene ade to someone else	fits, sick pay, vacation	pay, workers' compen	sation, Social Security
31.	Interest	ts in insurance	policies	ince; health savings account (F	SA); credit, homeowne	er's, or renter's insuran	ce
	■ No		,, 0	samigo account (r	_/ , 0.00, 11011100W110	,	
	☐ Yes. N	Name the insura	ance company of e Company n	ach policy and list its value. ame:	Beneficiary	r.	Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 4

Deb	tor 1	Amelia Rose Templeton		Case number (if known)	17-49229-mar
_	If you a someo	erest in property that is due you from someone who has are the beneficiary of a living trust, expect proceeds from a life ne has died.		are currently entitled to rece	eive property because
	■ No I Yes.	Give specific information			
_		against third parties, whether or not you have filed a lawsoles: Accidents, employment disputes, insurance claims, or rig		and for payment	
		Describe each claim			
	Other o	contingent and unliquidated claims of every nature, includ	ling counterclaims o	of the debtor and rights to	set off claims
	Yes.	Describe each claim			
	Any fin I No	ancial assets you did not already list			
	Yes.	Give specific information			
36.		he dollar value of all of your entries from Part 4, including art 4. Write that number here		es you have attached	\$2,060.50
Part	5: Des	scribe Any Business-Related Property You Own or Have an Intere	st In. List any real esta	te in Part 1.	
_	Yes. G	to Part 6. so to line 38. scribe Any Farm- and Commercial Fishing-Related Property You Cou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
46. I		own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	_ `	Go to Part 7.			
	☐ Yes.	Go to line 47.			
		_			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
_	Examp	have other property of any kind you did not already list? ples: Season tickets, country club membership			
	■ No I Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write tha	t number here	[\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.		2: Total vehicles, line 5	\$1,500.00		
57.	Part 3	3: Total personal and household items, line 15	\$2,900.00		
58.	Part 4	: Total financial assets, line 36	\$2,060.50		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	': Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$6,460.50	Copy personal property to	tal \$6,460.50
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$6,460.50

page 5

Official Form 106A/B

Schedule A/B: Property

Fill in this inform					
Debtor 1 Amelia Rose Templeton					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PF MICHIGAN		
Case number 1	17-49229-mar				
(if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	Household Goods & Furnishings Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)				
	Line from Scriedule AVB: 0.1			100% of fair market value, up to any applicable statutory limit					
	Printer Line from Schedule A/B: 7.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(3)				
	Line Ironi Scriedule AVB. 1.1			100% of fair market value, up to any applicable statutory limit					
	Clothing Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)				
	Line nom Schedule PVD. 11.1			100% of fair market value, up to any applicable statutory limit					
	Jewelry Line from Schedule A/B: 12.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(4)				
	Line Ironi Scriedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit					
	1-Dog Line from Schedule A/B: 13.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(3)				
	Line from Scriedule AVB. 13.1			100% of fair market value, up to any applicable statutory limit					

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption
Cash Line from Schedule A/B: 16.1	\$300.00	■	\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking: Citizens Bank, Joint with Mother Line from Schedule A/B: 17.1	\$0.50		\$0.50 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking: CFCU Line from Schedule A/B: 17.2	\$1.00		\$1.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking & savings accounts: Huntington Bank Line from Schedule A/B: 17.3	\$25.00		\$25.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking: Capital One Bank Line from Schedule A/B: 17.4	\$1.00	■	\$1.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Checking, Savings: Comerica Bank, Joint with grandmother Line from Schedule A/B: 17.5	\$300.00		\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
401(k): Great West Trust Co. Line from Schedule A/B: 21.1	\$883.00	■	100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)
Federal and State: 2017 Anticipated Tax Refunds (est) Line from Schedule A/B: 28.1	\$550.00		\$550.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	3 years after that for ca	ises fil	,	•

Fill in this information	on to identify you	ır case:				
<u> </u>	Amelia Rose Te	•				
	First Name	Middle Name Last Na	ame			
Debtor 2 (Spouse if, filing)	irst Name	Middle Name Last Na	ame			
United States Bankru	ptcy Court for the	EASTERN DISTRICT OF MICHIGAN				
Case number 17-4	19229-mar					
(if known)	13223-IIIai				☐ Chec	k if this is an
					amer	ided filing
Official Form 1	06D					
		Who Have Claims Secu	ırad	hy Property	. 1	12/15
Scriedule D.	Creditors	Wild Have Claims Sect	ai c u	by Property	<u>y</u>	12/15
		If two married people are filing together, both out, number the entries, and attach it to this fo				
1. Do any creditors have	e claims secured b	y your property?				
☐ No. Check this	s box and submit t	his form to the court with your other schedu	ıles. You	u have nothing else to	o report on this form.	
Yes. Fill in all	of the information	below.		-	·	
	cured Claims					
		more than one secured claim, list the creditor sep	arately	Column A	Column B	Column C
for each claim. If more t	than one creditor has	s a particular claim, list the other creditors in Part call order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
		Ğ		value of collateral.	claim	if any
2.1 Christian Fin	ancial Cr	Describe the property that secures the claim	n: ————————————————————————————————————	\$5,106.00	\$3,000.00	\$2,106.00
Creditor 3 Name		2010 Chevrolet HHR				
18441 Utica F	24	As of the date you file, the claim is: Check all	that			
Roseville, MI		apply. Contingent				
Number, Street, City,		☐ Unliquidated				
	•	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage	e or secu	red		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debtor	,	☐ Statutory lien (such as tax lien, mechanic's	lien)			
At least one of the de		☐ Judgment lien from a lawsuit				
☐ Check if this claim community debt	relates to a	☐ Other (including a right to offset)				
	Opened 01/15 Last Active					
Date debt was incurred		Last 4 digits of account number 2	2003			
	•	column A on this page. Write that number here):	\$5,10	6.00	
If this is the last page Write that number he		the dollar value totals from all pages.		\$5,10	6.00	
	-			<u> </u>		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill i	n this inform	nation to identify your case:							
Debt			an .						
Deni	101 1	Amelia Rose Templeto	Middle Name Last N	ame					
Debt		First Name	Middle Nome Lost N	ama					
(Spou	se if, filing)	First Name	Middle Name Last N	ame					
Unite	ed States Bar	nkruptcy Court for the: EAS	STERN DISTRICT OF MICHIGAN						
Case (if kno		7-49229-mar					Check i	if this is a	an
~ · · ·	–	1005/5				1		J	
	cial Form							404	-
			Have Unsecured Clair 1 for creditors with PRIORITY claim					12/1	_
Sched left. A	dule D: Credito ttach the Cont and case num	ors Who Have Claims Secured b	eases (Official Form 106G). Do not ir y Property. If more space is needed, ou have no information to report in a	copy the Part	you need, fill it out,	number the	entries in	the boxe	es on the
		rs have priority unsecured clair							
_	No. Go to Pa	• •	no agamot you.						
ı	Yes.								
io P F	dentify what typ possible, list the Part 1. If more t	pe of claim it is. If a claim has both e claims in alphabetical order accordinates than one creditor holds a particula	reditor has more than one priority unse priority and nonpriority amounts, list th rding to the creditor's name. If you hav r claim, list the other creditors in Part 3. instructions for this form in the instruct	at claim here a e more than two	nd show both priority a	and nonpriority	y amounts	s. As muc	ch as ge of
						amount		amount	
2.1	*IRS Priority Cre	editor's Name	Last 4 digits of account numb	er <u>5854</u>	\$677.00	\$6	677.00		\$0.00
	PO Box		When was the debt incurred?	2016		_			
		reet City State Zlp Code	As of the date you file, the cla	im is: Check a	II that apply				
	Who incurred	I the debt? Check one.	☐ Contingent						
	Debtor 1 or	nly	☐ Unliquidated						
	Debtor 2 or	nly	☐ Disputed						
	Debtor 1 a	nd Debtor 2 only	Type of PRIORITY unsecured	claim:					
	☐ At least on	e of the debtors and another	☐ Domestic support obligation	5					
	☐ Check if th	his claim is for a community de	bt Taxes and certain other deb	ts you owe the	government				
	Is the claim s	subject to offset?	Claims for death or persona	injury while yo	u were intoxicated				
	No		Other. Specify						
	☐ Yes		Taxes						
Part	2: List Al	l of Your NONPRIORITY Un:	secured Claims						
		rs have nonpriority unsecured	claims against you?						
[☐ No. You hav	ve nothing to report in this part. Su	bmit this form to the court with your oth	er schedules.					
ı	Yes.								
t!	ınsecured claim	n, list the creditor separately for ea	n the alphabetical order of the credit ach claim. For each claim listed, identify other creditors in Part 3.lf you have mo	what type of c	laim it is. Do not list cl	aims already i	included i	n Part 1. I	If more

Total claim

Official Form 106 E/F

AFNI	Last 4 digits of account number	5854	\$336.00
Nonpriority Creditor's Name	Last 4 digits of account number		\$330.U
P.O. Box 47248 Oak Park, MI 48237	When was the debt incurred?	2009	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection	Account	
Allied Cash Advance Nonpriority Creditor's Name	Last 4 digits of account number	5854	\$677.0
27080 John R Rd #A Madison Heights, MI 48071	When was the debt incurred?	2014	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt	_	vestion agreement or diverse that you did not	
Is the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Cash Adva	nce	
Avant Inc.	Last 4 digits of account number	5854	\$5,361.0
Nonpriority Creditor's Name 640 N LaSalle St	When was the debt incurred?	2015	
Chicago, IL 60654 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Personal L	nan	

Debto	Amelia Rose Templeton		Case number (if know) 17-49229-mar	
4.4	Capital One	Last 4 digits of account number	9615	\$1,432.00
	Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim in	Opened 08/07 Last Active 4/21/17 s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes	☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify		
4.5	Capital One	Last 4 digits of account number	6043	\$880.00
	Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 02/14 Last Active 3/14/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify ☐ Credit Carc	ration agreement or divorce that you did not g plans, and other similar debts	
4.6	Cbna Nonpriority Creditor's Name	Last 4 digits of account number	3171	\$665.00
	Po Box 6497 Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim i	Opened 04/12 Last Active 5/07/16 s: Check all that apply	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Carc	ration agreement or divorce that you did not g plans, and other similar debts	

Ccs/first National Ban	Last 4 digits of account number	8487	\$732.0
Nonpriority Creditor's Name			Ψ102.0
500 E 60th St N Sioux Falls, SD 57104	Opened 10/14 Last Active 1/18/16		
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u>I</u>	
Chase Bank	Last 4 digits of account number	7484	\$500.0
Nonpriority Creditor's Name PO BOX 36520 Louisville, KY 40233	When was the debt incurred?	2007	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charged of	f Checking Account	
Check into Cash	Last 4 digits of account number	5854	\$677.0
Nonpriority Creditor's Name		004.4	
36827 Mound Rd Sterling Heights, MI 48310	When was the debt incurred?	2014	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Cash Adva	nce	

Debte	Or 1 Amelia Rose Templeton		Case number (if know) 17-49229-mar	
4.1 0	Christian Financial Cr	Last 4 digits of account number	2002	\$2,937.00
	Nonpriority Creditor's Name 18441 Utica Rd	When was the debt incurred?	Opened 01/15 Last Active 5/12/17	
	Roseville, MI 48066	= A		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.1 1	Citizens Bank	Last 4 digits of account number	9224,6290	\$1,205.00
	Nonpriority Creditor's Name 1000 Lafayette Blvd Bridgeport, CT 06604	When was the debt incurred?	Opened 08/13 Last Active 5/13/16	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Various Co	llection Accounts	
4.1	Comenity Bank Avenue	Last 4 digits of account number	2844	\$1,213.00
	Nonpriority Creditor's Name PO BOX 182789 Columbus, OH 43218	When was the debt incurred?	2012	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	

Comenity Bank Marathon	Last 4 digits of account number	0086	\$482.00
Nonpriority Creditor's Name PO BOX 182789	When was the debt incurred?	2014	
Columbus, OH 43218	_		
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Gas Card		
Comenity Bank Torrid	Last 4 digits of account number	2253	\$852.00
Nonpriority Creditor's Name PO BOX 182789	When was the debt incurred?	2013	****
Columbus, OH 43218	mon was the dest mounted.	2010	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
•	Debts to pension or profit-sharin	og plane, and other similar debte	
■ No □ Yes	Other. Specify Clothing	ig pians, and other similar debts	
Comenity Bank/HSN Nonpriority Creditor's Name	Last 4 digits of account number	5854	\$1,287.00
PO Box 182118	When was the debt incurred?	2014	
Columbus, OH 43218	_		
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Household	Goods	

Comenity Bank/Lane Bryant	Last 4 digits of account number	5854	\$609.00
Nonpriority Creditor's Name 450 Winks Lane Bensalem, PA 19020	When was the debt incurred?	2014	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Clothing		
Dsnb Macys	Last 4 digits of account number	0997	\$934.00
Nonpriority Creditor's Name	_		
Po Box 8218 Mason, OH 45040	When was the debt incurred?	Opened 12/13 Last Active 5/01/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Enhanced Recovery Co L	Last 4 digits of account number	1422	\$336.00
Nonpriority Creditor's Name 8014 Bayberry Rd	When was the debt incurred?	Opened 03/17	
Jacksonville, FL 32256 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Collection	Attorney Sprint	

Schedule E/F: Creditors Who Have Unsecured Claims

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Enhanced Recovery Group	Last 4 digits of account number	5854	\$336.00
Nonpriority Creditor's Name 3014 Bayberry Rd. Jacksonville, FL 32256	When was the debt incurred?	2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection		
First Premier Bank	Last 4 digits of account number	6288	\$1,085.00
Nonpriority Creditor's Name		Opened 06/14 Last Active	
601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	2/19/16	
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
First Premier Bank	Last 4 digits of account number	6622	\$919.00
Nonpriority Creditor's Name	_		
601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 07/15 Last Active 2/19/16	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
•	<u>-</u> ' ' '	a plane, and other similar debte	
No	☐ Debts to pension or profit-sharin	iy pians, and other similar debts	

Debtor	Amelia Rose Templeton	Case number (if know)	17-49229-mar
4.2	Jh Portfolio Debt Equi	Last 4 digits of account number 7391	\$1,287.00
	Nonpriority Creditor's Name 5757 Phantom Dr Ste 225	When was the debt incurred? Opened 11/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce report as priority claims	that you did not
	■ No	Debts to pension or profit-sharing plans, and other similar de	bts
	Yes	Factoring Company Account Co Capital Bank	menity
4.2	Jh Portfolio Debt Equi	Last 4 digits of account number 2565	\$1,214.00
	Nonpriority Creditor's Name 5757 Phantom Dr Ste 225 Hazelwood, MO 63042	When was the debt incurred? Opened 11/16	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce report as priority claims	that you did not
	■ No	\square Debts to pension or profit-sharing plans, and other similar de	bts
	Yes	■ Other. Specify Factoring Company Account Company Bank	menity
4.2	Jh Portfolio Debt Equi	Last 4 digits of account number 4803	\$931.00
	Nonpriority Creditor's Name 5757 Phantom Dr Ste 225 Hazelwood, MO 63042	When was the debt incurred? Opened 11/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce	that you did not
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar de	bts
	Yes	■ Other. Specify Bank Factoring Company Account Co	menity

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Jh Portfolio Debt Equi	Last 4 digits of account number	0719	\$852.00
Nonpriority Creditor's Name 5757 Phantom Dr Ste 225 Hazelwood, MO 63042	When was the debt incurred?	Opened 10/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Bank	Company Account Comenity	
Jh Portfolio Debt Equi	Last 4 digits of account number	4098	\$482.00
Nonpriority Creditor's Name 5757 Phantom Dr Ste 225	When was the debt incurred?	Opened 11/16	
Hazelwood, MO 63042 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Bank	Company Account Comenity	
MABT/CONT FINANCIAL	Last 4 digits of account number	0524	\$749.00
Nonpriority Creditor's Name PO Box 8099 Nowark, DE 10714	When was the debt incurred?	2015	
Newark, DE 19714 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Collection		

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Marrial Pank Core		2022	¢4 707 00
Merrick Bank Corp Nonpriority Creditor's Name	Last 4 digits of account number	3933	\$1,727.00
Po Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 02/13 Last Active 4/07/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Midland Funding	Last 4 digits of account number	4606	\$1,744.00
Nonpriority Creditor's Name 2365 Northside Dr Ste 30 San Diego, CA 92108	When was the debt incurred?	Opened 11/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Bank	Company Account Synchrony	
Mobiloans	Last 4 digits of account number	3216	\$1,547.00
Nonpriority Creditor's Name	_		Ψ1,041.00
P.O. Box 1409	When was the debt incurred?	2013	
Marksville, LA 71351 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,	,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Line of Cre	dit	

Nordstrom Fsb	Last 4 digits of account number	3635	\$1,881.00
Nonpriority Creditor's Name			* ,
13531 E Caley Ave Englewood, CO 80111	When was the debt incurred?	Opened 01/14 Last Active 3/14/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u>!</u>	
Paypal Credit	Last 4 digits of account number	5854	\$273.00
Nonpriority Creditor's Name P O Box 105658	When was the debt incurred?	2015	
Atlanta, GA 30348 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Acco	ount	
Syncb/qvc	Last 4 digits of account number	5762	\$561.00
Nonpriority Creditor's Name	_		
Po Box 965018 Orlando, FL 32896	When was the debt incurred?	Opened 05/15 Last Active 3/20/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Charles the state of the destroy of		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	

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Synchrony Care Credit	Last 4 digits of account number	0546	\$1,356.00
Nonpriority Creditor's Name	-		* 1,00000
PO Box 965036 Orlando, FL 32896	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit acco	punt	
Synchrony TJX COS	Last 4 digits of account number	1110	\$1,743.00
Nonpriority Creditor's Name PO BOX 965018	When was the debt incurred?	2014	Ψ1,1 40.0
Orlando, FL 32896	_		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Miscellane	ous Items	
Farget Card Services	Last 4 digits of account number	5854	\$1.0
Nonpriority Creditor's Name	_		
3901 West 53rd St.	When was the debt incurred?	2015	
Sioux Falls, SD 57106 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	□ Debts to pension or profit-sharin ■ Other. Specify Collection	g pians, and other similar debts	

Td Bank Usa/targetcred	Last 4 digits of account number	4004	\$571.00
Nonpriority Creditor's Name			• • • • • • • • • • • • • • • • • • • •
Po Box 673 Minneapolis, MN 55440	When was the debt incurred?	Opened 12/13 Last Active 3/14/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	a ciaim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Trident Medical Center	Last 4 digits of account number	5854	\$1,200.0
Nonpriority Creditor's Name 9300 Medical Plaza Dr.	When was the debt incurred?	2010	
Charleston, SC 29406 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	on plans, and other similar debts	
□ Yes	Other. Specify Medical De		
Universal Credit Servi Nonpriority Creditor's Name	Last 4 digits of account number	6812	\$509.0
3582 Avon St Hartland, MI 48353	When was the debt incurred?	Opened 10/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Collection Chiropracti	Attorney Healthsource	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				<u>-</u>	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	677.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
		, ,		· ——	
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	677.00
		- Caar - Henry / Add miles od miles gired.	00.	<u> </u>	077.00
				7	otal Claim
	6f.	Student loans	6f.	\$	17,619.00
Total				·	,
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
nomi ant 2	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	42,083.00
		here.		Ψ	.2,300.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	59,702.00
	٥,٠		-,.	T	33,702.00

Official Form 106 E/F

Fill in this inform				
Debtor 1	Amelia Rose Tem	pleton		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN	
Case number	17-49229-mar			
(if known)				Check if this is an
_	17-49229-mar			☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3	<u> </u>		0.0.0	2 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	<u> </u>		<u> </u>	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		Otate	ZII Oode	
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Fill in th	is information to identify your	case:			
Debtor 1	Amelia Rose Ten	ıpleton			
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case nu	mber 17-49229-mar				
(if known)				Check if this amended filir	
				amended iiii	ig
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
□ N ■ Y 2. W Arizo	es	ı lived in a community pr o Nevada, New Mexico, Puo	operty state or territory? erto Rico, Texas, Washing	? (Community property states and territories in	clude
in liı Forr	ne 2 again as a codebtor only i	f that person is a guarant	tor or cosigner. Make su	your spouse is filing with you. List the perure you have listed the creditor on Schedule G). Use Schedule D, Schedule E/F, or Schedule	e D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe Check all schedules that apply:	the debt
3.1	Marilyn Yvonne Aftanas 32815 Exeter Ct, Warren, MI 48092			■ Schedule D, line □ Schedule E/F, line □ Schedule G Christian Financial Cr	

	in this information t	- :-									
	in this information to	Amelia Rose									
	btor 2 buse, if filing)										
		tcy Court for the:	EASTERN DISTRICT	OF MICHIGAN							
Cas	se number 17-	49229-mar					Check	if this is			
(If kr	nown)			-			☐ Ar	n amende	ed filing		
_										g postpetition ollowing date:	
	fficial Form						MI	M / DD/ \	YYYY		
S	chedule I: `	Your Inco	ome								12/15
atta	ch a separate shee	et to this form. (r spouse is not filing w On the top of any additi	onal pages, write yo			d case nu	mber (if	known). A	inswer every	
	information.			Debtor 1						ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Empl	oyed mployed			
	employers.		Occupation	Sr. Teller	Sr. Teller						
	Include part-time, self-employed wo		Employer's name	Citizens Bank							
	Occupation may in or homemaker, if		Employer's address	27777 Southfiel Southfield, MI 4							
			How long employed t	here? 5 years	5			_			
Pai	rt 2: Give Det	tails About Mon	thly Income								
	mate monthly inco		nte you file this form. If	you have nothing to r	report for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing e space, attach a se		re than one employer, co	ombine the informatio	on for all e	empl	oyers for t	hat perso	on on the li	nes below. If	you need
							For Deb	tor 1		btor 2 or ing spouse	
2.			ry, and commissions (be calculate what the monthle		2.	\$	2,	443.00	\$	N/A	
3.	Estimate and list	t monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$	2.44	3.00	\$	N/A	

Fill	in this informat	tion to identify yo	our case:			I		
Deb		Amelia Rose		ton		Check	c if this is:	
Dob	tor 2						An amended filing	
	ouse, if filing)						A supplement snow	ving postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	EASTE	RN DISTRICT OF MICHIO	GAN	1	MM / DD / YYYY	
	e number nown)	'-49229-mar						
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your l	Exper	ises				12/15
info	rmation. If m		eded, atta	If two married people a ch another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to		n a senar	ate household?				
	□ 103. D00		n a sepan	ate nousenoid:				
		-	t file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Debto	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Mother		<u>51</u>	■ Yes
					Grandma		91	□ No ■ Yes
								□ No
								☐ Yes
								□ No
3.	Do your exp	enses include	_	No				☐ Yes
0.	expenses of	f people other to d your depende	han $_{f \Box}$	No Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a sup				
Incl	ude expense	s paid for with r	non-cash	government assistance	if you know			
	value of such ficial Form 10		d have inc	cluded it on Schedule I:	Your Income		Your exp	enses
4.		r home owners		ses for your residence.	Include first mortgag	e 4. \$		700.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
	4c. Home	maintenance, re	pair, and ι	ıpkeep expenses		4c. \$		0.00
_		owner's associat			and another to the	4d. \$		0.00
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	ome equity loans	5. \$		0.00

Fill in this in	formation to identify your	case:					
Debtor 1	Amelia Rose Ten	npleton					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN				
Case number	r 17-49229-mar						
(if known)					Check if this is an amended filing		
You must file obtaining mo years, or both	If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below						
		one who is NOT an atto	orney to help you fill out ba	nkruptcy forms?			
No							
☐ Ye	s. Name of person				tition Preparer's Notice, ature (Official Form 119)		
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Signature of Debtor 2

Date

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X /s/ Amelia Rose Templeton

Amelia Rose Templeton Signature of Debtor 1

Date June 21, 2017

Best Case Bankruptcy

Fill	l in this infor	mation to identify you	r case:			
De	btor 1	Amelia Rose Tei	mpleton			
		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Ca	aa numbar	47 40000				
	se number nown)	17-49229-mar				heck if this is an
					a	mended filing
<u>O</u> 1	ficial Fo	rm 107				
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		nore space is needed, n). Answer every que	•	this form. On the top of any	vadditional pages, write you	ir name and case
	<u> </u>	,	arital Status and Where You	Lived Refere		
				Liveu belole		
1.	What is you	ır current marital statu	is?			
	☐ Married	i				
	Not ma	rried				
2.	During the l	last 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
		rior Address:	Dates Debtor 1	Debtor 2 Prior Ad		Dates Debtor 2
	Debtor 11	nor Address.	lived there	Debtor 2 i nor Au	ui ess.	lived there
3.	Within the I	ast 8 years, did you ev	ver live with a spouse or leg	al equivalent in a commun	ity property state or territory	? (Community property
stat	es and territor	ries include Arizona, Ca	lifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	isconsin.)
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	hedule H: Your Codebtors (Of	fficial Form 106H).		
Da	rt 2 Expla	in the Sources of You	ır İncome			
га	Ехріа	in the Sources of Tou	- Income			
4.					ear or the two previous caler	ndar years?
			u received from all jobs and a have income that you receive			
	□ No					
		II in the details.				
			511		D.1.	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions
				exclusions)		and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,567.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	or last calen anuary 1 to	ndar year: December 3	1, 2016)	■ Wages, commissions, bonuses, tips	\$29,800.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
		dar year befo December 3		■ Wages, commissions, bonuses, tips	\$34,202.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	List each	•	e gross inco	se and you have income that yome from each source separa		·	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	or last calen	ndar year: December 3	1. 2016)	401k Retirement Plan	\$1,522.00		
Pa 6.		r Debtor 1's o	or Debtor 2 otor 1 nor E	Made Before You Filed for 's debts primarily consumer Debtor 2 has primarily consumer personal, family, or household	r debts? ımer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an
		During the 9	00 days befo	ore you filed for bankruptcy, di	d you pay any creditor a total	of \$6,425* or more?	
			Go to line 7	7 .			
			paid that cr not include	editor. Do not include paymer payments to an attorney for the	nts for domestic support oblig nis bankruptcy case.	n one or more payments and the ations, such as child support a or after the date of adjustment	and alimony. Also, do
	.	•	-			or arter the date of adjustifient	•
	■ Yes.			or both have primarily consurer you filed for bankruptcy, di		of \$600 or more?	
		□ _{No.}	Go to line 7	7 .			
		Yes	List below e include pay	each creditor to whom you pai		the total amount you paid that port and alimony. Also, do not i	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1	Amelia Rose Templeton	Cas	Case number (if known) 17-49229-mar			
	nin 1 year before you filed for bankruptcy, rt-appointed receiver, a custodian, or anot		ion of an assignee	for the ben	efit of creditors, a	
	No Yes					
Part 5:	List Certain Gifts and Contributions				_	
	No Yes. Fill in the details for each gift.				? Value	
per	ts with a total value of more than \$600 person	Describe the gifts	the gi	you gave fts	value	
	son to Whom You Gave the Gift and dress:					
14. With ■	nin 2 years before you filed for bankruptcy. No Yes. Fill in the details for each gift or contribu		with a total value o	of more than	\$600 to any charity?	
mor Cha	ts or contributions to charities that total re than \$600 arity's Name dress (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates contri		Value	
Part 6:	List Certain Losses					
	nin 1 year before you filed for bankruptcy c ambling?	or since you filed for bankruptcy, did you	lose anything be	cause of the	ft, fire, other disaster,	
•	No					
	Yes. Fill in the details.					
	w the loss occurred Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List ance claims on line 33 of Schedule A/B: Pro	pending loss	of your	Value of property lost	
Dow 7:	List Certain Payments or Transfers	ance claims on line 33 of <i>Schedule A/D. Fi</i> c	operty.			
	nin 1 year before you filed for bankruptcy,		ehalf pay or transf	er any prope	erty to anyone you	
	sulted about seeking bankruptcy or preparticed any attorneys, bankruptcy petition prepart		es required in your	bankruptcy.		
	No					
	Yes. Fill in the details.					
Add Em	rson Who Was Paid dress ail or website address rson Who Made the Payment, if Not You	Description and value of any propert transferred		oayment nsfer was	Amount of payment	
Fre Lav 238 Dea	ego & Associates - The Bankruptcy	Attorney Fees	05/2/2	2017	\$0.00	
454	N Legal Data Services 40 Honeywell Ct yton, OH 45424	Credit Report	06/13	/17	\$50.00	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor	Amelia Rose Templeton			Case number	(if known) 17-49229	-mar
pro	hin 1 year before you filed for bankrupto mised to help you deal with your credito not include any payment or transfer that yo	ors or to make payme			or transfer any prop	erty to anyone who
	No Yes. Fill in the details.					
	rson Who Was Paid Idress	Description an transferred	d value of any pro	pperty	Date payment or transfer was made	Amount o paymen
trar Incl	hin 2 years before you filed for bankrup asferred in the ordinary course of your bude both outright transfers and transfers mude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial ande as security (such a	affairs? as the granting of a		perty to anyone, oth	
	rson Who Received Transfer Idress	Description an property trans			any property or s received or debts xchange	Date transfer was made
Pe	rson's relationship to you			P	3 -	
	hin 10 years before you filed for bankru neficiary? (These are often called asset-pr No		any property to a	self-settled to	rust or similar device	e of which you are a
	Yes. Fill in the details.					
Na	me of trust	Description an	d value of the pro	perty transfer	red	Date Transfer was made
Part 8:	List of Certain Financial Accounts, In	estruments Safe Done	neit Boyoe and St	orago Unite		maao
sol Inc	hin 1 year before you filed for bankruptod, moved, or transferred? lude checking, savings, money market, uses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial acc	ounts; certificates	of deposit; s		
	me of Financial Institution and Idress (Number, Street, City, State and ZIP de)	Last 4 digits of account number	Type of according trument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
Ρ.	nase O. Box 15153 ilmington, DE 19850-5153	XXXX-7484	■ Checking □ Savings □ Money Mar □ Brokerage □ Other		6/2016	\$0.00
Ρ.	tizens Bank O. Box 13620 olumbus, OH 43213	xxxx-6290	■ Checking □ Savings □ Money Mar □ Brokerage □ Other	A ir	6/2016 ccount closed the negative 6471	\$0.00
	you now have, or did you have within 1 h, or other valuables?	year before you filed	for bankruptcy, a	ny safe depos	it box or other depo	sitory for securities,
■	No Yes. Fill in the details.					
	me of Financial Institution Idress (Number, Street, City, State and ZIP Code)	Who else had a Address (Number State and ZIP Code	er, Street, City,	Describe the	contents	Do you still have it?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

22.	Have you stored property in a storage unit or p	place other than your home within 1	vear before you filed for bankruptcy	1?					
	_	siace carer anality car memo mainin i	your bololo you mou for build uptoy	•					
	■ No □ Yes. Fill in the details.								
	Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you s								
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City, State and ZIP Code)	besonde the contents	have it?					
Par	9: Identify Property You Hold or Control for	,							
23.	o you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust or someone.								
	■ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	10: Give Details About Environmental Inform	nation							
For	he purpose of Part 10, the following definitions	s apply:							
_	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used					
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings that y	you know about, regardless of wher	n they occurred.						
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environm	ental law?					
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or admin	istrative proceeding under any envi	ironmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or Co	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	/ithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability compan	y (LLC) or limited liability partnersh	ip (LLP)						
Offici		of Financial Affairs for Individuals Filing		page					

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Deb	otor 1	Amelia Rose Templeton		Case	e number (if known)	17-49229-mar		
		□ A mando on to a mando on the						
		☐ A partner in a partnership						
☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting or equity securities of a corporation						
		No. None of the above applies. Go to Part 12.						
☐ Yes. Check all that apply above and fill in the details below for each business.								
	Add	siness Name dress nber, Street, City, State and ZIP Code)	Describe the nature of the business		Employer Identif Do not include S	ication number ocial Security number or ITIN.		
	(Num		Name of accountant or bookkeeper		Dates business	existed		
28.		Nithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial nstitutions, creditors, or other parties.						
		No Yes. Fill in the details below.						
		ne ress ber, Street, City, State and ZIP Code)	Date Issued					
Par	t 12:	Sign Below						
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Amelia Rose Templeton								
		Rose Templeton e of Debtor 1	Signature of Debtor 2					
Dat	e J	une 21, 2017	Date					
Did : ■ N	lo	ttach additional pages to Your Stateme	ent of Financial Affairs for Individuals F	Filing 1	for Bankruptcy ((Official Form 107)?		
■ N	lo	ay or agree to pay someone who is not ame of Person Attach the Bankru				al Form 119).		

Statement of Financial Affairs for Individuals Filing for Bankruptcy